Practitioner's Docket No. K-1775D

PATENT TOWN

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Montgomery, Jr.

Application No.: 10//657,397 Group No.: 3673

Filed: 09/08/2003 Examiner: Singh, Sunil For: MANUALLY REPLACEABLE PROTECTIVE WEAR SLEEVE

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## NOTICE OF APPEAL FROM THE PRIMARY EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES (37 C.F.R. § 1.191)

	(37 (	∪.F.K. § 1.191)				
NOTE:		ection in a prior application and one rejection in a continuing 3,167; 1203 O.G. 63, at 93 (Oct. 10, 1997).				
NOTE:	NOTE: There is no requirement for a notice of appeal to: (1) be signed; or (2) identify the appealed clair 62 Fed. Reg. 53,131, at 53,167; 1203 O.G. 63, at 94 (Oct. 10, 1997).					
Appli	cant hereby appeals to the Boa	rd from the decision of the Primary Examiner,				
mailed .	Jan 19,2005, finally rejec	ting claims 22-25.				
The it	tem(s) checked below are appro	priate:				
1. STA	ATUS OF APPLICANT					
This a	application is on behalf of					
χŌ	☑ other than a small entity.	•				
	] a small entity.					
	(When using Express Mail, the	ER 37 C.F.R. §§ 1.8(a) and 1.10* Express Mail label number is mandatory; I certification is optional.)				
I hereby o	certify that, on the date shown below, the	nis correspondence is being:				
	·	MAILING				
	sited with the United States Postal Servic 450, Alexandria, VA 22313-1450	e in an envelope addressed to Commissioner for Patents, P.O.				
	37 C.F.A. § 1.8(a)	37 C.F.R. § 1.10 *				
XX with s	sufficient postage as first class mail.	as "Express Mail Post Office to Addressee"				
	TE	Mailing Label No (mandatory)				
☐ facsim	nile transmitted to the Patent and Trade					
		- LL				
	·	Signature				
Date: Ee	bruary 22, 2005	Rhonda L. Sanders				
	·	(type or print name of person certifying)				

\* Only the date of filing (§ 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under § 1.8 continues to be taken into account in determining timeliness. See § 1.703(f). Consider "Express Mail Post Office to Addressee" (§ 1.10) or facsimile transmission (§ 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

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02/28/2005 MAHHED1 00000042 10657397

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	As	tatement			•
		is attached.			
		was already fil	ed on	·	· •
					•
2. FEE	FOR	FILING NOTICE	OF APPEAL		
Pursu	ant to	37 C.F.R. § 41	.20(b)(1), the fee	for filing the Notice of	Appeal is:
	] sma	all entity		*	\$170.00
Ę.	∃ <sub>x</sub> oth	er than a small	entity	•	\$340.00
				tice of Appeal fee due	\$ <u>500.00</u>
3. EXT	ENSIO	N OF TERM			
NOTE:	to cond in excess objection or action shall be after the rejection or short	clude processing or ss of three months the on, argument, or oth on was mailed or give or reduced by the nur or date of mailing o on, objection, argume tened statutory peri	examination of an app at are taken to reply to her request, measurin n to the applicant, in w nber of days, if any, be r transmission of the ent, or other request a	deemed to have failed to englication for the cumulative to any notice or action by the Ofig such three-month period which case the period of adjusted in the communication notify and ending on the date the reject in the Office action or not	tal of any periods of time fice making any rejection, from the date the notice ment set forth in § 1.703 date that is three months ving the applicant of the oly was filed. The period,
NOTE:	applica	tions. 37 C.F.R. §	1.191(d). (But see 37	1 are subject to the provision C.F.R. § 1.645 for extension Sion of time in reexamination	n of time in interference
		· (cc	omplete (a) or (b),	as applicable)	
The p			e for a patent ap	plication and the prov	isions of 37 C.F.R.
(a) [		•		of time under 37 C.F.F ne total number of mon	_
	Extensi		Fee for other		
	(month	_	small entity	· · · · · · · · · · · · · · · · · · ·	L
	one m	•	\$ 110.00 \$ 430.00	·	
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	_		•	ext item, if applicable)	
		therefor of \$	r mor	oths has already been set is deducted from the trequested.	cured. The fee paid otal fee due for the
		Exter	sion fee due witl	n this request \$	
			or		
(b) XIX	3 Арр	olicant believes	that no extension	of term is required. H	owever, this condi-

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tional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

4. TOTAL FEE DUE	•
The total fee due is:	•
Notice of Appeal fee \$ 500.00	<u> </u>
Extension fee (if any) \$	
	TOTAL FEE DUE \$ 500.00
5. FEE PAYMENT	
★★ Attached is a 🖾 check 🗆 money	order in the amount of \$_500.00
☐ Authorization is hereby made to char	rge the amount of \$
☐ to Deposit Account No	-
to Credit card as shown on the form PTO-2038.	attached credit card information authorization
WARNING: Credit card information should not be	included on this form as it may become public.
Charge any additional fees required be manner authorized above.	by this paper or credit any overpayment in the
A duplicate of this paper is attached	
6. FEE DEFICIENCY	
necessary to cover the additional time consu six-month period has expired before the de abandoned. In those instances where auth encountered in returning the papers to the F	authorization to charge an account, additional fees are uned in making up the original deficiency. If the maximum, eficiency is noted and corrected, the application is held horization to charge is included, processing delays are PTO Finance Branch in order to apply these charges prior urge the deposit account for any fee deficiency should be 065 O.G. 31-33.
	is required,
ANI	D/OR
☑x If any additional fee for claims is requested that the charge:  ✓x If any additional fee for claims is requested.  ✓x If a fee for claims is requested.	uired,
☑ Deposit Account No02_226	7
☐ Credit card as shown on the attace PTO-2038.	ched €redit card information authorization form
WARNING: Credit card information should not be in	included on this form as it may become public.
Date: February 22, 2005	SIGNATURE OF PRACTITIONER
Reg. No.: 28,688	Stephen T. Belsheim (type or print name of practitioner)
	<u>179 Belle Forrest Cr. Ste. 1</u> P.O. Address
Customer No.: 1400	Nachwillo TN 27221

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